

St. Lucie County / American Red Cross 2011 Water Safety Registration Form Open Space Pool Ave. M and 13th Street, Ft. Pierce, Fl (772) 462-1903

\$55.00 without sponsorship - \$25.00 with sponsorship Sponsorships are limited. 2010 tax return is required.

Mondays / Wednesdays

A session is 6 classes running for three weeks on Monday and Wednesday evenings. Classes during the week of Fourth of July will be held on Wednesday and Thursday.

OP1

July 18- August 3

Make-up August 5

Preschool

OP2

June 27- July 13

Make-up July 15

Preschool

Checks payable to: St. Lucie County BOCC

6:00 - 6:40		6:00 - 6:40	
1	2	1	2
OP1P1	OP1P2	OP2P1	OP2P2
Learr	to Swim	Learn	to Swim
6:50 - 7:45		6:50 - 7:45	
Level 1	Level 2	Level 2	Level 3
0P11	OP12	OP22	OP23
	Adult	А	dult
	OP1A e facility to inquire about bad weath		10-7:35 DP2A rior to class.
	The one make-up day will be t	·	
Participant's Name:		Male	e / Female DOB
•		Male	e / Female DOB
Mailing Address:		Male	e / Female DOB
Mailing Address: Contact E-mail Address:		Male	e / Female DOB
Participant's Name: Mailing Address: Contact E-mail Address: Home Phone: Cell Phone:		Male	e / Female DOB
Mailing Address: Contact E-mail Address: Home Phone: Cell Phone:	al needs: NO YES	Please ask for an additional form	to fill out.
Mailing Address: Contact E-mail Address: Home Phone: Cell Phone: Medical Condition / Special have thoroughly real		Please ask for an additional form	to fill out.

No Refunds / Credits are only given upon supervisor approval. You must e-mail guggeric@stlucieco.org three days prior to the start of the session you originally signed up for to receive a credit. Send the students name, level and class information in the e-mail. Please call 772 - 462 -2560 and give the same information if e-mailing is not possible and be sure to state the day and time you called. The credit can only be transferred one time to pool passes or you may roll a credit to another session of 6 classes in the 2011 season if room is available. A credit of your choice will be granted with a doctor's note if your child missed the session of 6 classes due to an unforeseen illness three or less days prior to the start of the session. Once you have attended class and the session started no credits will be issued.

Program Guidelines

- Students must shower and wait in the designated area before class.
- You may only enter the pool gates 10 minutes before class begins to get prepared for class.
- We are not responsible for lost or stolen items.
- Students must wear swim suits and children who are not completely potty trained must have a swim diaper on.
- Whoever brings the student to lessons must stay on deck and in turn leave with the student.

Bad Weather Cancellation

- Call the facility to inquire about bad weather cancellations 30 minutes prior to class.
- Only one day will be made up if we are rained out during a session.
- Ten dollars worth of pool passes will be granted if the make-up day is rained out or we have a second rain day.
- The one make-up day will be the last Friday of the session.

Waiver

In consideration of the opportunity afforded to the undersigned to participate in a St. Lucie County Department of Parks & Recreation activity, hereafter described, the undersigned hereby and voluntarily waives any right or cause of action against St. Lucie County, its officers, agents and employee arising out of any claim whatsoever as a result of any injuries to body, life, limb or property arising from participation in the described activity. The undersigned participant shall indemnify and hold harmless St. Lucie County, its officers, agents and employees from and against all judgments, orders, decrees, and attorney's fees, costs, expenses and liabilities arising from or out of such claim, investigation or defense thereof.

St. Lucie County has my permission to use/take a photograph of my child for the use of publicity of the above program without compensation. I hereby waive any claim that may arise by the use/taking of my child's photograph.

My signature on the front indicates that I have read and understand the waiver and that I have been provided with a copy of the rules and regulations set forth by the St. Lucie County Department of Parks & Recreation. I have read and thoroughly understand them and agree to explain them to the children in my care who are involved in the programs offered.

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ST. LUCIE COUNTY PARKS & RECREATION SERVICES USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ST. LUCIEC COUNTY PARKS & RECREATION IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ST. LUCIE COUNTY PARKS & RECREATION SERVICES HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.